

TOWN OF EAST WINDSOR
Park and Recreation Department
P.O. Box 375
11 Rye Street
Broad Brook, CT 06016
(860) 627-6662

The following form must be completed prior to participation in any recreation program sponsored by the East Windsor Recreation Department. All payment(s) must be included with the registration form. Please feel free to call the Recreation Office if other financial arrangements need to be made.

Program/Team Group _____

Participant's Name _____ Age _____

Address _____ Tele: _____

Emergency Contact _____ Tele: _____

Special Concerns _____

Payment Enclosed \$ _____ Method: Check # _____
Cash _____

I understand that injuries are a possibility as a result of participation in this activity. In case of emergency, if family cannot be reached, I hereby authorize any attending Emergency Department Physician to treat me. I also understand that my own medical insurance will be used in the event of an injury.

I agree to hold harmless the Town of East Windsor, the Parks and Recreation Department, its officers, sponsor, agents, employees and anyone else associated with the program, from any loss, blame, expenses, injuries, property damage and liability whatsoever that may arise from participation in this program.

Signature: _____ Date: _____